Docket No.: 117415

APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PRINTER WITH PRINTHEAD FULLY TRAVELING AROUND DRIVE BELT LOOP described and claimed in the specification: Check one

attached hereto. b. filed on _____ as Application No. _____ and amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

> James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771; Mario A. Costantino, Reg. No. 33,565; Stephen J. Roe, Reg. No. 34,463; Joel S. Armstrong, Reg. No. 36,430; Christopher W. Brown, Reg. No. 38,025; Richard E. Rice, Reg. No. 31,560; Paul Tsou, Reg. No. 37,956; and Eric D. Morehouse, Reg. No. 38,565.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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2	**Inventor's Si	gnature:	Given, Name	Middle Initial	Family Name
3	**Date of Sign	ature:	Deven	hr 24 2003	
			Month	Day	Year
Resid	Residence:	Palı	nyra	New York	USA
		C	ity	State or Province	Country
	Citizenship:	USA			
		Post Office Address: (Insert complete	2988 Sherwood Road		
		mailing address, including country)	Palmyra, New York 14522	USA	

If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

^{**}Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

**Inventor's Signature: **Date of Signature: **Date of Signature: **Date of Signature: **Penfield Nonth Day Year Residence: Penfield New York USA City State or Province Country Citizenship: USA Post Office Address: (Insert complete mailing address, including country) **Inventor's Signature: **Date of Signature: City State or Province City State or Province City State or Province City State or Province Country Citizenship: Post Office Address: (Insert complete mailing address, including country) Typewritten Full Name **Fourth Joint Inventor (if any) **Inventor's Signature: **Date of Signature: **Date of Signature: Month Day Year Residence: City State or Province Country **Inventor's Signature: **Date of Signature: **Date of Signature: **Date of Signature: **Date of Signature: Given Name Middle Initial Family Name **Inventor's Signature: **Date of Signature: Given Name Middle Initial Family Name **Inventor's Signature: **Date of Signature: Given Name Middle Initial Family Name **Inventor's Signature: **Date of Signature: **Date of Signature: City State or Province Country Typewritten Full Name **Inventor's Signature: **One of Signature: Month Day Year Residence: City State or Province Country **Inventor's Signature: **One of Signature: **One of Signature: Month Day Year Residence: City State or Province Country **One of Signature: **One of Signature: **One of Signature: **One of Signature: Month Day Year **One of Signature: **One of Signature: **One of Signature: **One of Signature: Month Day Year **One of Signature: **One o	1 Typewritten				
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Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.